



JOHN W. HICKENLOOPER  
Mayor

# CITY AND COUNTY OF DENVER

DEPARTMENT OF ENVIRONMENTAL HEALTH  
Nancy J. Severson, Manager

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Division of Environmental Quality  
201 W Colfax Ave Dept 1009  
Denver, CO 80202  
PHONE: (720) 865-5452  
FAX: (720) 865-5534  
[www.denvergov.org/DEH](http://www.denvergov.org/DEH)

November 10, 2005

Victor Ketellapper, P.E.  
Project Manager  
U.S. Environmental Protection Agency – Region VIII  
Superfund Program  
999 18th St., Suite 300  
Denver, Colorado 80202-2466

Dear Mr. Ketellapper:

The October (2005) monthly status reports for the VB/I-70 Community Health Program are appended. This month's field activities report has been modified in format; the report content remains the same. As always, please feel free to contact me if you have any questions or would like to modify the content, format, or distribution of future reports.

Sincerely,

Martha F. Hoff, CIH, CSP  
VB/I-70 Community Health Program Administrator

Enclosures (8)

VB/I-70 CHP October 2005 Program Activities Report  
VB/I-70 CHP October 2005 Steering Committee Report  
VB/I-70 CHP October 2005 Arsenic Data and Case Management Subcommittee Report  
VB/I-70 CHP October 2005 Biomonitoring Subcommittee Report  
VB/I-70 CHP October 2005 Health Education and Community Outreach Subcommittee Report  
VB/I-70 CHP October 2005 Small Grants and Community Funds Report

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EPA REGION VIII  
SUPERFUND BRANCH

cc:

Lorraine Granado – Cross Community Coalition  
Beverly Lumumba, Ph.D. – Clayton Neighborhood Association  
Michael Maes – Swansea Neighborhood  
Gloria A. Shearer – Cole Neighborhood Association  
Akwe Starnes – Whittier Neighborhood Association  
Anthony Thomas – Civic Association of Clayton  
Jim Weaver – Cole Neighborhood Association  
Raquel Holquin – CEASE  
Joan Hooker – Clayton Neighborhood Association

(via email only):

Sandy Douglas – Cole Neighborhood Association  
Celia VanDerLoop – City and County of Denver, Department of Environmental Health  
Bill Benerman – City and County of Denver, Department of Environmental Health  
Gene Hook – City and County of Denver, Department of Environmental Health  
Jason Salas – City and County of Denver, Department of Environmental Health  
Beverly Tafoya-Dominguez – City and County of Denver, Department of Environmental Health  
Jennifer Chergo – U.S. Environmental Protection Agency, Region VIII  
Patricia Courtney – U.S. Environmental Protection Agency, Region VIII  
Jane Mitchell – Colorado Department of Public Health and Environment  
Mishelle Macias – Colorado Department of Public Health and Environment  
Wendy Hawthorne – Northeast Denver Housing Center  
Clementine Pigford – Northeast Denver Housing Center  
Tonya Hope – c/o Northeast Denver Housing Center  
Paul Melinkovich, M.D. – Denver Health and Hospital Authority  
Mark Anderson, M.D. – Denver Health and Hospital Authority/PEHSU  
Chris Poulet – Agency for Toxic Substances and Disease Registry  
George Weber – George Weber Inc. Environmental

**VB/I-70 Community Health Program  
October 2005 Status Report  
Program Activities Report**

**October Activities and Tasks**

**Health Education and Community Outreach**

**Community Health Workers**

- Continued canvassing activities; through 10/31/2005, 965 home visits completed, with 1602 "not home" contacts, 231 partial/other contacts, and 61 signed access agreements.
- Conducted outreach for and assisted at final 2005 biomonitoring clinic on 10/1/05. Participated in cultural diversity workshop development activities with Dr. Beverly Lumumba.

**Program Management, Development, Administration and Community Partnership Management**

- Reviewed one new request for funding submitted through VB/I-70 CHP Small Grants and Community Funds process.
- Continued to track all relevant field measures.

**Development**

- Finalized documents on window washing and lead "hot spots"; made final edits to posters on Mexican candy lead hazards and flyer on vending machine/costume jewelry lead hazards.
- Completed suggestions for modification of DHHA lead test result notification letters; initiated development of companion CHP fact sheet.
- Continued development of database to store, organize, and manipulate field data.
- Developed second draft of home visit evaluation data form.
- Began review of CEASE recommendations for realtor and contractor outreach.
- Continued to identify resources of realtor, landlord, and contractor outreach.
- Began development of daycare, preschool, and DPS class matrix with respect to scheduling and conducting child and parent focused outreach activities

**Administration**

- Received final contracts for signature by current and two new CHW's; initiated signature process.
- Submitted contract paperwork to initiate one new CHW contract.
- Completed processing of 2005-2006 cooperative agreement for second program year funding.
- Sent finalized contract to NDHC for signature.
- Received approval to hire 0.5 FTE staff; continued with interview process.

**Community Partnership**

- See Health Education and Community Outreach Subcommittee October report, as submitted.

**Biomonitoring**

- See Biomonitoring Subcommittee October report, as submitted.

**Case Management**

- See Arsenic Data and Case Management Subcommittee October report, as submitted.
- See Lead Data and Case Management Subcommittee October report, as submitted.

## **November Activities and Tasks**

### **Health Education and Outreach**

#### **Community Health Workers**

- Continue participation in cultural diversity workshop development.
- Continue canvassing and community activities.

#### **Program Management, Development, Administration and Community Partnership Management**

- Evaluate Small Grants applications, as received.
- Continue to track relevant field data.

#### **Development**

- Complete companion fact sheet for DHHA lead result notification letters.
- Finalize posters on Mexican candy lead hazards and flyer on vending machine/costume jewelry lead hazards. Send out for reproduction.
- Continue with review of CEASE recommendations for realtor and contractor outreach.
- Begin review of ROD, cooperative agreement, and CHEOP to produce overarching matrix of goals, objectives, and evaluation parameters specified in documents.
- Complete development of field data database.
- Complete development of home visit evaluation protocol and field form.
- Develop training format and schedule for new CHW contractors.
- Begin formal definition of second year program components.

#### **Administration**

- Complete signature process of CHW contracts.
- Complete signature process for NDHC contract.
- Select and extend offer – 0.5 FTE staff position.

#### **Community Partnership**

- Partner to develop display “collage” of Mexican candies (re: lead hazards) for use in outreach activities.
- Continue to support community and EPA partnership in obtaining remaining sampling access agreements.

## **Future Activities and Task**

### **Health Education and Outreach**

#### **Community Health Workers**

- Assist in developing second year home visit content.
- As time permits, assist in developing methods to reach mothers with newborns to provide early intervention education; conduct focused “mini” outreach campaign if feasible.
- Utilizing canvassing experiences, work with a health educator to define critical lead topics for a first time home visit and effective presentation of written materials.

#### **Program Management, Development, Administration and Community Partnership Management**

- Continue to define additional program outreach methods and audiences (e.g. school programs, community events, media campaigns, etc.).
- Evaluate and analyze field data.

#### **Development**

- Compile and distribute summary of review of ROD, cooperative agreement, and CHEOP along with overarching matrix of goals, objectives, and evaluation parameters.
- Finalize year two outreach content and messages.
- Utilize first program year evaluation data to assess program progress and potential third year content.

**Administrative**

- Utilize folder/divider presentation for outreach material.

**Community Partnership**

- Partner with Outreach Development Group and other community leaders and members to define year two program content and messages.
- Partner with community to assess first program year evaluation data and potential third program year content.
- Work with Cross Community Coalition to develop a newsletter article on CHP.

**VB/I-70 Community Health Program  
October 2005 Status Report  
Steering Committee Report**

<b>Steering Committee</b>	
US EPA Region VIII	Victor Ketellapper
	Patricia Courtney
DEH	Celia VanDerLoop
	Gene Hook
	Jay Salas
	Martha Hoff - <b>chair</b>
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD
PEHSU	Mark Anderson, MD
CDPHE	Mishelle Macias
	Jane Mitchell
Community	Gloria Shearer

<b>Steering Committee Tasks</b>
<ol style="list-style-type: none"> <li>1. Develop a Memorandum of Agreement (MOA) describing the roles of various agencies, responsibilities, reporting, information flow, and general funding responsibilities. <i>pending review – Denver City Attorney's Office</i></li> <li>2. Provide regular updates on program activities as required. <i>ongoing</i></li> <li>3. Review, approve, and coordinate planning, reporting, and activities of the program, Steering Committee, and its subcommittees. <i>ongoing</i></li> <li>4. Resolve disputes that arise through the course of the program and issues that are not resolved in subcommittees. <i>as necessary</i></li> <li>5. Identify, develop, and approve needed policies for effective program operation. <i>ongoing</i></li> <li>6. Coordinate between remedy implementation and community health program operations. <i>ongoing</i></li> <li>7. Provide necessary coordination and transfer of program data. <i>ongoing</i></li> <li>8. Provide oversight to the planning, implementation, and evaluation of the program. <i>ongoing</i></li> <li>9. Review program evaluation methods and results; modify program as necessary. <i>ongoing</i></li> </ol>

<b>October Activities and Tasks</b>
<p>There was no Steering Committee meeting held in October. The next meeting, originally scheduled for 11/23/05, has been rescheduled to 12/07/05.</p> <p>All copies of the Memorandum of Understanding were distributed for signature.</p> <p>The format for the first quarterly report (third quarter ending 06/30/05) was developed and data content reviewed for accuracy.</p> <p>Began defining program evaluation parameters to include in program year one annual report.</p>
<b>November Activities and Tasks</b>
<p>Release first quarterly report.</p> <p>Continue to define annual evaluation parameter.</p>
<b>Future Activities and Tasks</b>
<p>Release first program year annual report.</p>

**VB/I-70 Community Health Program  
October 2005 Status Report  
Subcommittee Report**

<b>Biomonitoring Subcommittee</b>	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
DHHA	Marti Potter
	Linda Kauffman
CDPHE	Mishelle Macias – <b>co chair, Lead</b>
	Jane Mitchell – <b>co chair, Arsenic</b>
Community Technical Advisor	Michael Kosnett, MD (CEASE)
ATSDR	Chris Poulet
DHHA	Paul Melinkovich, MD
PEHSU	Mark Anderson, MD

<b>Biomonitoring Subcommittee Tasks</b>
<ol style="list-style-type: none"> <li>1. Identify and select preferred biological media and test methods for arsenic and lead biomonitoring. <i>Complete</i></li> <li>2. Recommend preferred methodologies for biological sample collection. <i>Complete</i></li> <li>3. Develop a quality assurance/quality control plan for biomonitoring program.</li> <li>4. Identify and evaluate suitable laboratory protocols and assist with selection of acceptable analytical laboratories with a demonstrated ability to meet program data quality requirements. <i>Complete</i></li> <li>5. Develop required consent agreements to provide informed consent for community members considering participation in biomonitoring program. <i>Complete</i></li> <li>6. Coordinate with DHHA to address HIPPA concerns with blood lead biomonitoring activities and to provide required data confidentiality. <i>Complete</i></li> <li>7. Develop mechanisms to ensure the medical confidentiality of biomonitoring information. <i>Complete</i></li> <li>8. Ensure that appropriate state IRB reviews are conducted, if required, and coordinate with DHHA to determine need for COMIRB review. <i>Complete</i></li> <li>9. Interface with the community outreach and health education planning process as needed. <i>Complete</i></li> <li>10. Develop evaluation and reporting mechanisms, and schedule for biomonitoring issues, as requested by the steering committee. <i>Ongoing</i></li> <li>11. Report to the Steering Committee on progress, status, and issues requiring resolution. <i>Ongoing</i></li> </ol>

<b>October Activities and Tasks</b>
<p>One biomonitoring clinic was held October 1, 2005. Eight children and one adult pregnant woman were tested for lead. Participants were either not eligible for arsenic testing or declined to be tested. One of the eight children tested had a blood lead result reported as QNS.</p> <p>Mishelle spoke with Dr. Carla Walker, of Medtox Laboratories about the way the lab reports QNS samples. We believe further discussion and action may be necessary to resolve this issue. We are trying to coordinate a Biomonitoring meeting to discuss these issues and conference in the Medtox</p>

staff. The date is not confirmed yet. Jane contacted Noel Stanton at the Wisconsin Department of Hygiene Lab to obtain the target values for the filter paper QC samples. A summary will be available at the biomonitoring meeting in November.

#### **November Activities and Tasks**

A biomonitoring sub-committee meeting will be scheduled to discuss laboratory issues discussed above.

Staff will begin data analysis and program evaluation in preparation for upcoming meetings with the community, and steering committee members.

#### **Future Activities and Tasks**

Compile program QC data and provide draft report to Steering Committee.

Continue work on program evaluation measures.



**VB/I-70 Community Health Program  
October 2005 Status Report  
Subcommittee Report**

<b>Arsenic Data and Case Management Subcommittee</b>	
US EPA Region VIII	Wendy O'Brien or alternate
DEH	Gene Hook
CDPHE	Jane Mitchell - <b>chair</b>

<b>Arsenic Data and Case Management Subcommittee Tasks</b>
<ol style="list-style-type: none"> <li>1. Identify and select preferred reporting methods and format for arsenic data. [<b>Complete</b>]</li> <li>2. Develop a quality assurance and quality control plan for arsenic data management. [<b>Complete</b>]</li> <li>3. Develop a secure database system to assist with arsenic data management, reporting, and tracking. [<b>Complete</b>]</li> <li>4. Develop acceptable case tracking protocols. [<b>Complete</b>]</li> <li>5. Develop case coordination protocols. [<b>Complete</b>]</li> <li>6. Identify appropriate trigger levels for case management and case coordination. [<b>Complete</b>]</li> <li>7. Develop evaluation and reporting mechanisms, and schedule for arsenic data and case management issues. [<b>In progress</b>]</li> <li>8. Report to the Steering Committee on progress, status, and issues requiring resolution. [<b>On-going</b>]</li> </ol>

<b>October Activities and Tasks</b>
<p>All arsenic test results have been received from the lab. Result letters for all participants within normal ranges have been prepared for internal review. Four children tested high for arsenic levels in hair. One is a confirmed elevation for a child who tested high last month. CDPHE is coordinating with EPA on soil sampling/remediation status at properties where these children spend their time. Each family will be contacted by phone to discuss recommended follow-up.</p>
<b>November Activities and Tasks</b>
<p>Mail final result letters to all participants.          Complete any recommended follow-up arsenic testing.          Coordinate with EPA and other agencies, as appropriate, to determine likely source of elevated arsenic tests.</p>
<b>Future Activities and Task</b>
<p>Provide requested data review and summaries to support recommendations for biomonitoring protocols for the 2006 field season.          Continue work on evaluation measures.</p>

**VB/I-70 Community Health Program  
October 2005 Status Report  
Subcommittee Report**

<b>Health Education and Community Outreach Subcommittee</b>	
US EPA Region VIII	Patricia Courtney – adjunct member
DEH	Jay Salas
	Beverly Tafoya-Dominguez – <b>chair</b>
DHHA	Marti Potter – adjunct member
ATSDR	Chris Poulet – adjunct member
Community	Gloria Shearer, Anthony Thomas

<b>Health Education and Community Outreach Subcommittee Tasks</b>
<ol style="list-style-type: none"> <li>1. Develop plans for outreach and program recruitment methods. <i>Complete, with ongoing evaluation.</i></li> <li>2. Work with communities to identify preferred testing locations, to develop preferred program advertisement methods, and to define recruitment strategies to help maximize program participation. <i>Complete, with ongoing evaluation and revision as needed.</i></li> <li>3. Develop materials for use during education and outreach activities. <i>Complete, with ongoing revisions and development as identified (see #6)</i></li> <li>4. Develop distribution plans for outreach and educational materials. <i>Ongoing</i></li> <li>5. Develop evaluation and reporting mechanisms for education and outreach activities and the identification of program revisions. <i>Ongoing, within CHP program development activities</i></li> <li>6. Develop a plan for on-going communication and feedback from the community regarding health education and outreach materials, as needed. <i>Complete, with ongoing evaluation.</i></li> <li>7. Report to the Steering Committee on progress, status, and issues requiring resolution. <i>Ongoing</i></li> </ol>

<b>October Activities and Tasks</b>
Revise Lead & Jewelry and Candy Posters, Print final Hot Spots and Keep your Children Safe documents; incorporate in CHW Home Visit Packets. DHHA result letters and Jewelry flyer sent to toxicologist for review, recommendations: 1. to incorporate soil testing, home visit and NDHC referrals onto a separate CHP fact sheet to be included with each letter, 2. Try to make pictures clearer or delete a few and make enlarge others. Calls are being made to schedule presentations at childcare, ECE and Head Start centers.
<b>November Activities and Tasks</b>
Community committee member, Gloria Shearer will make a collage with jewelry and candy with lead hazards, displayed safely, to use at local schools and libraries.
CHP fact sheet will be developed to send with DHHA result letters.
<b>Future Activities and Tasks</b>
Continue with document development as needed. Plan to assemble final informational packet, by Feb 06.

**VB/I-70 Community Health Program  
October 2005 Status Report  
Small Grants and Community Funds Report**

**Small Grants**

Number of Small Grants Proposals Received: 1

Number of Small Grants Awarded: 0 (one pending for \$2500.00)

Cumulative Total Award Amount: \$3750.00

**Community Funds Report**

Funds Dispersed (Report Month): none

Cumulative Funds Dispersed: \$1916.00